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JOHN G TOLOMEI, PATENT DEPARTMENT UOP LLC 25 EAST ALGONQUIN ROAD P O BOX 5017 DES PLAINES, IL 60017-5017

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(Depositor's name)	Rose A. Lubich
(Signature)	Roseasuich
(Date)	9-29-04

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/925,275	08/09/2001	Christopher Naunbeimer	106056	4216

TITLE OF INVENTION: SEPARATION PROCESS AND APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	D/.TE DUE
nonprovisional	NO	\$1330		\$0	\$1330	10/12/2004
EXAM	MNER	ART UNI	T	CLASS-SUBCLASS]	
MCHENRY	r, Kevin L	1725		422-139000		
 I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the 1	rinting on the patent front page, li names of up to 3 registered pater	, JOHN I	G. TOLOMEI
			•	s OR, alternatively, name of a single firm (having as a	membera 2 JAMES	C. PASCHALL
			registere 2 registe	ed attorney or agent) and the name ared patent attorneys or agents. If to name will be printed.	es of up to	

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UOP LLC

DES PLAINES, ILLINOIS

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PTOL-85 (Rev. 07/04) Approved for use through 04/30/2007. 1330.00 OP 01 FC:1501

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То:	CUSTOMER SERVICE CENTER	Fax:	703-746-4000
Dept:	OFFICE OF PATENT PUBLICATIONS	Phone:	703-305-8283
From:	ROSE LUBICH, Patent Dept.	Date:	9-29-04
Phone:	847-391-2040	Fax:	847-391-2387
Serial Number:	09/925,275	Examiner:	Kevin L. McHenry
Allowance Date:	7/12/04	Art Unit:	1725
Issue Fee Date:	10/12/04	Confirm.No.	·4216
Altachments	1. PART B - ISSUE FEE TRANSMITTAL;	Pages:	4 including this page.
	2. FEE TRANSMITTAL FOR FY 2004;		
	3. CREDIT CARD FORM PTO-2038.		

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for FY 2004

(\$) 1330

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Application Number	09/925,275
Filing Date	August 9, 2001
First Named Inventor	Christopher Naunheimer
Examiner Name	Kevin L. McHenry
Art Unit	1725
A44	100000

Complete if Known

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)		
Check Credit card Money Other None	3. ADDITIONAL FEES		
Order Order	Large Entity , Small Entity		
Deposit Account:	Fee Fee Fee Fee Fee Description		
Deposit Account	Code (\$) Code (\$)	e Paid	
Number	1051 130 2051 65 Surcharge - late filing fee or oath		
Deposit Account	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet		
Name The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee	1805 1.840° 1805 1.840° Requesting publication of SIR after		
to the above-identified deposit account.	Examiner action		
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month		
1. BASIC FILING FEE	1252 420 2252 210 Extension for reply within second month	-	
Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 2254 740 Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401 330 2401 165 Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filling a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 0	. 1452 110 2452 55 Petition to revive - unavoidable		
1 13.12	1453 1,330 2453 665 Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1301 1,330 2301 603 Offitty (\$500 feet (d) Telescop)	1330	
Extra Claims below Fee Pald	1502 480 2502 240 Design issue fee		
Total Claims 20** = X \$18 = 1	1503 640 2503 320 Plant issue fee		
ridependent 3** = X \$86 = Claims Mulliple Dependent =	1460 130 1460 130 Petitions to the Commissioner		
Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee F	1806 180 1806 180 Submission of Information Disclosure Stmt		
Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)	1	
1202 18 2202 9 Claims in excess of 20	1809 770 2809 385 Filing a submission after final rejection		
1201 86 2201 43 Independent claims in excess of 3	(37 ČFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b))		
1204 86 2204 43 ** Reissue independent daims over original patent	1801 770 2801 385 Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 0	Other fee (specify) 1814 Statutory disclaimer (\$110)		
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 3	30	
SUBMITTED BY (Complete (# applicable))			

Registration No. 36,887 Telephone 847 391-2355 James C. Paschall Name (Print/Type) (Attorney/Agent) Date Signature

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